# UTAH INSURANCE DEPARTMENT STATE OFFICE BUILDING ROOM 3110 SALT LAKE CITY, UTAH 84114-6901

# INDIVIDUAL LICENSE APPLICATION (NO REFUND) APPLICATION MUST BE TYPED OR PRINTED LEGIBLY

License Information ☐ Initial	License Addition to Curre	ent license (add line of) Authority			
Personal Information: Utah Resident 🗌 YES 🔲 NO State of Residency					
License Class & Line(s) applyi	License Class & Line(s) applying for				
CLASS: AGENT BROKER CONSULTANT SURPLUS LINES BROKER CUST. SVC REPLINES: LIFE DISABILITY VARIABLE CONTRACT PROPERTY/LIABILITY SURPLUS LINES WORKERS COMP					
LINES: CREDIT (ALL LINES)	INES: CREDIT (ALL LINES) CREDIT LIFE/DISABILITY MOTOR CLUB TRAVEL				
CLASS: TITLE AGENT (UTAH RESIDENTS ONLY)  SEARCH ESCROW MARKETING REP					
NOTE: When applying for variable line, Utah law requires that you attach evidence of Utah securities license. A copy of your current U-4 or CRD status form indicating Utah Approved.					
1. Last Name	2. First Name	3. Middle Name			
		3. Middle Name			
4. Soc. Security Number	5. Date of Birth MM/DD/YY	6. Gender			
		6. Gender			
4. Soc. Security Number		6. Gender			
4. Soc. Security Number  7. Residence Address	5. Date of Birth MM/DD/YY	6. Gender  MALE FEMALE			
4. Soc. Security Number  7. Residence Address	5. Date of Birth MM/DD/YY  9. State	6. Gender  MALE FEMALE			
4. Soc. Security Number  7. Residence Address  8. City	5. Date of Birth MM/DD/YY  9. State	6. Gender  MALE FEMALE			

15.	Mailing Address					
16.	City		17. State	18. Zip Cod	le	
19.	Reside	nce Phone ( )				
20.	Busine	ss Phone ( )				
21.	Fax Nu	mber ( )				
22.	E-mail	or web address				
Lice	nse Qua	lification Informat	ion:			
23.	A)		convicted of, or are you curre itting a crime, whether or not		YES	NO
		includes, but is n or jury, having en given probation, a	misdemeanor, felony or a milit ot limited to, having been foun tered a plea of guilty or nolo suspended sentence or a fine.  you must attach to this applica	d guilty by verd contendre, or ha	lict of a	judge
		b) a copy of the c) a copy of the	ement explaining the circumstan charging document; and official document which demonst final judgment.			the
	B)	an owner, partner, involved in an adm	siness in which you are or were officer or director ever been inistrative proceeding regardin ccupational license?			
		terminated; or being license to resolve administrative or occupational licent withdrawing an apposolely to noncomples pay a renewal fee.	aving a license censured, suspeng assessed a fine, placed on pan administrative action; being arbitration proceeding which is se; or having a license applicalication to avoid a denial. You iance with continuing educations, you must attach to this appl	robation or surr g named as a par related to a pr tion denied or t u may exclude te requirements or	endering ty to an ofession he act of ermination	al or f ns due
		ii you aliswered ye	s, you must actach to this appl	ICallOII.		

- a) a written statement identifying the type of license and explaining the circumstances of each incident;
- b) a copy of the Notice of Hearing or other document that states the charges and allegations; and
- c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.

If you answered "YES" to any of the above questions in #23, you must provide all pertinent court or agency documentation, as well as a dated and signed complete written explanation, and have your application reviewed by the Utah Insurance Department.

# Agent appointments or Designations:

Before a <u>Producer</u> can sell an insurer's product, the producer, or the organization (agency) he/she represents, must be contracted with and appointed by that insurer. The producer may be personally contracted and appointed by an insurer or may be designated to an insurance agency. Insurer agent appointments or agency designations may be submitted with this application or submitted after the license is issued. Appointment and designation fees are \$12 each (per company or agency).

# POWER OF ATTORNEY OF INDIVIDUAL NONRESIDENT LICENSEE

KNOW ALL MEN BY THESE PRESENTS:	
That	surance in and for im may be his said resident nd such s
IN WITNESS WHEROF, the undersigned has to these presents caused his name to be s	ubscribed
at the city ofin the state of	
on the,,	
Individual Nonresident Licensee Signature	
I certify that all information I have supplied in this license application is contrue and correct to the best of my knowledge. I certify that I will comply with Insurance statutes & regulations. I authorize the Commissioner to make inquiry person or state or federal agency regarding myself as applicant for a Utah Indiv Insurance License.	all Utah of any
SIGNATURE: DATE:	

#### UTAH INDIVIDUAL NEW LICENSE FEES:

Limited Agent License	\$45.00
Agent, Broker, Consultant, Adjuster, or Surplus Lines	\$60.00
Fee to add new line of authority to existing license	\$25.00

Note: Producers wishing to hold both Agent & Broker Licenses will need to complete 2 Applications, and pay \$60 per application. Two licenses will be issued.

#### APPLICATION CHECK LIST:

# Nonresident Applicants:

- 1. Complete and sign power of attorney form
- 2. Attach current (current = not older than 90 days) letter of certification from resident state, or if relocating to Utah, a letter of clearance from former state.

### Variable Contracts Applicants:

1. Attached evidence of Utah Securities License. We will accept a current (not older than 30 days) U-4 or CRD status form indicating Utah Approval.

#### All Applicants:

- 1. Signed and dated the application.
- 2. Mail completed application with proper fees to the address on the first page of this form.

# METHOD OF PAYMENT

CHECK	MONEY ORDER	CREDIT OR DEBIT CARD
CARD TYPE	CARD NUM	MBER EXPIRATION DATE
NAME OF CARDHOLDER	SIGNATUR	BILLING ZIP CODE

If you have any questions about this application, you can contact the Producer Services Division of the Utah Insurance Department, Monday through Friday 8:00 A.M. to 5:00 P.M. (except holidays) by any of the following means:

# Telephone:

Toll Free inside of Utah (800) 439-3805 Insurance Dept. Main number (801) 538-3800

Fax: (801) 538-3829

E-mail licensing@insurance.state.ut.us
Web site www.insurance.state.ut.us

If you are a resident of Utah and need to take any of the insurance examinations, you will need to contact **EXPERIOR TESTING CORP.** to schedule your examination. They will be able to answer your questions about testing fees and available testing dates. They can be reached at:

**Phone:** (800) 697-8947 **Fax** (800) 347-9242

Web site www.experioronline.com

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